**Gallaudet University Check Request**

<table>
<thead>
<tr>
<th>Today's Date</th>
<th>OPTIONAL tracking number-up to 8 characters</th>
</tr>
</thead>
</table>

### PAY TO:

**Payee**

**Address**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

**Social Security #**

*if payee is an individual*

### DESCRIPTION | AMOUNT

### CHARGE TO:

<table>
<thead>
<tr>
<th>Department</th>
<th>Expense Account</th>
<th>Amount</th>
<th>Department</th>
<th>Expense Account</th>
<th>Amount</th>
</tr>
</thead>
</table>

**Requested By**

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Telephone</th>
<th>Date</th>
</tr>
</thead>
</table>

**Print:**

*Check requests must be approved in accordance with policy 2.02. Appropriate documentation must be attached.*

**Special Instructions:**

- U.S. resident
- International resident
- EFT (attach appropriate paperwork for new account set-up)
- Payment to this invoice only
- Combine with other payments
- Mail Check (please provide current address)
- Pick up at Cashier's Office
- Hold check with these special instructions

**FINANCE OFFICE USE ONLY**

Approved by: __________ Vendor: __________ Voucher: __________

*Updated 03/2007*